EDUCATION FOR HEALTH
Fitness to Practise Policy

1 INTRODUCTION

Education for Health seeks to uphold the core values of the NHS constitution which, alongside our own organisational values, promotes an ethos of respect. We promote practice and professional values that safeguard patients and seek to ensure that any variation in safe practice is properly investigated and tackled.

Regulatory bodies (e.g. NMC, HCPC, GMC, General Pharmaceutical Council) set standards for professional behaviour in the respective codes of professional conduct and ethics. Post-registration/postgraduate students must abide by the relevant professional code whilst practising and undertaking academic study.

2 BACKGROUND

Consideration of Fitness to Practise is necessary in order to protect the public, uphold professional standards including the relevant code of conduct and contribute to the maintenance of the reputation of the profession and public confidence in the profession.

Most Education for Health students are registered with a professional body and are therefore expected, as well as complying with the requirements of Education for Health regulations, to comply with relevant regulatory and/or professional body codes of conduct in respect of professional standards of behaviour.

Education and training can help reduce the numbers of registrants whose conduct and competence fall below acceptable standards later in their careers. This can be achieved not only by maintaining the quality of post-qualifying education, but also by ensuring that accredited training programmes produce professionals who understand the importance of professionalism and of keeping up to date and fit to practise throughout their careers.

3 THE PROFESSIONAL BEHAVIOUR EXPECTED OF STUDENTS

We expect all students to demonstrate safe, effective professional practice in line with their professional code of conduct. The professional behaviour we expect is outlined in the Student Charter and is as follows:

- Uphold public trust and confidence in their relevant profession by maintaining appropriate personal and professional standards of behaviour, personal appearance and conduct. This includes the use of electronic resources such as online discussion forums.
- Promote anti-discriminatory practice, inclusion and diversity.
- Act in the best interests of patients, their carers and the public in relation to respect, privacy, dignity and equality.
- Maintain health, safety and security for patients, self and others in line with legislation.
- Respect and maintain confidentiality of information.
- Actively participate in maintaining safe patient care through evidence based practice, research and reflective practice.
- Take responsibility of own learning and personal professional development by identifying and maximising learning opportunities.
• Actively participate in the evaluation process of all learning and teaching.
• Accept responsibility in identifying personal limitations and act within the limits of knowledge skills and professional knowledge.
• Declare any information that could affect conduct, performance or health during the course of education.
• Act with integrity and honesty, carrying out all duties in a professional and ethical manner.
• Notify Education for Heath in the event of any sickness or absence affecting study and ensure effective timekeeping.
• Report any unacceptable behaviour or practice which adversely affects self or others.

Students are expected to have read, understood and agreed to abide by their responsibilities under the Education for Health Student Charter. The Charter is available as section 3.3 on our Policies and Procedures webpage: https://www.educationforhealth.org/education/student-support/regulations-policies/

4 ENSURING FITNESS TO PRACTISE

4.1 Fitness to Practise refers to suitability, in terms of conduct, competence and health, to remain on a professional education programme without restrictions.

Students must be aware that Education for Health may be obliged to report to the student’s employer, any fitness to practise concerns regarding unsafe practice.

4.2 Unsafe practice is described as a ‘behaviour that places the client or staff in either physical or emotional jeopardy’ (Scanlan et al., 2001, p. 1). Physical jeopardy is the risk of causing physical harm. Emotional jeopardy means that the student creates an environment or anxiety or distress which puts the client or family at risk for emotional or psychological harm.

Unsafe practice includes:

• An act or behaviour of the type which violates the Nursing and Midwifery Council’s Code of Professional Conduct (NMC 2015) or the Health Professions Standards of Conduct, Performance and Ethics (HCPC 2012) or good medical practice (GMC 2013). This includes an online/electronic act or behaviour which violates guidelines such as the NMC’s Social Media Guidance (2016, available at https://www.nmc.org.uk/standards/guidance/social-media-guidance/).
• An act or behaviour which threatens or has the potential to threaten the physical, emotional, mental or environmental safety of the client, a family member, or substitute familial person, another student, member of staff or other health care provider.
• An act or behaviour (commission or omission) which constitutes practice for which a student is not competent, authorised or educated at the time of the incident.
4.3 **The Assessment Process**

The assessment process requires the demonstration of positive attitudes and behaviours as well as knowledge and skills and an awareness of patient expectations in relation to their role. The ethos of our Teaching and Learning Strategy is to promote the application of theory to practice in the students’ specific clinical setting. This is underpinned by the learning outcomes for the educational programmes which are mapped to the following areas: Knowledge and Understanding, Cognitive Skills, Practical and Professional Skills and Key Transferable Skills (FHEQ UK Qualifications Framework). This promotes the values of professionalism, team working, communication and respect, and ensures these concepts form the basis of the learning materials and activities throughout the programme, culminating in the summative assessment which requires students to demonstrate achievement of these attributes.

In respect of academic assessments, unsafe practice includes:

- Expressing practice that if acted on would constitute unsafe practice as above
- Omission of an essential element of care in an academic piece of work that if the omission occurred in practice would constitute unsafe practice as identified above
- Failure to recognise or acknowledge an act or behaviour that has been recounted in an academic assignment and that constitutes unsafe practice.

5 **CONSEQUENCES OF THE DEMONSTRATION OF UNSAFE PRACTICE**

Referral to employer may be made following:

- Concern about the student’s academic or clinical performance as agreed by the External Examiners.
- Concern about the outcome of any disciplinary proceedings that arise during a programme of study.
- Concerns about a student’s physical and mental health that arise during contact with the student.
- Concerns about a student’s professional conduct that arise during contact with the student.

5.1 **Confidentiality**

Confidentiality is a critical component of all assessment elements, with students required to adhere to their professional code of conduct and maintain the confidentiality of their workplace and patients. In addition ‘ground rules’ are set at the beginning of face-to-face learning elements ensuring students do not disclose confidential information during the course of their learning. Students are also informed prior to their involvement in forums of expectations in relation to their professional behaviour.

The Nursing & Midwifery Council code of conduct and the Health Professions Council issue clear guidance on the protection of confidentiality, and the protection of information from improper disclosure at all times. It is particularly important that professional standards are maintained regarding patient/service user confidentiality while undertaking academic study, assessment and examination. A breach of confidentiality may affect the outcome of assessment and in serious cases could result in a mark of 0% Fail.
5.2 **Academic Misconduct**
Following the completion of the academic misconduct procedure a proven allegation of misconduct may result in the application of Education for Health Fitness to Practise procedures being applied which may result in a further penalty being applied. Further information about academic misconduct is available as sections 9.8 – 9.10 on our Policies and Procedures webpage: [https://www.educationforhealth.org/education/student-support/regulations-policies/](https://www.educationforhealth.org/education/student-support/regulations-policies/).

The NMC code requires nurses to ‘act with honesty and integrity at all times’ and so plagiarism is considered a professional offence. All professionals may be referred to their employer for disciplinary action who may also decide to report the incident to the professional’s regulatory body.

5.3 **Unsafe practice**
Students must demonstrate the principles of safe and competent practice within all parts of the assessment process. This means that students who write/demonstrate either by intention or accident, an error that could potentially compromise patient safety, will automatically fail that complete element of assessment.

Students are required to resubmit the element of assessment that they have failed. Please note however that if an element of assessment was initially failed and then passed on reassessment, the mark for that module will be capped at 40%.

Where a student is judged to have demonstrated unsafe practice for any outcome in a practice assessment, a fail is recorded for the practice element of the module. Students are required to resit the entire practice assessment. As noted above, if an element of assessment was initially failed and then passed on reassessment, the mark for that module will be capped at 40%.

6 **PROCESS TO BE FOLLOWED IN CASE OF FITNESS TO PRACTISE ISSUE BEING RAISED**

6.1 The process to be followed when a concern has been raised about a student’s fitness to practise is outlined in the ‘Procedure for investigating concerns regarding student fitness to practise,’ available as section 9.17 on our Policies and Procedures webpage: [https://www.educationforhealth.org/education/student-support/regulations-policies/](https://www.educationforhealth.org/education/student-support/regulations-policies/). This procedure is intended to be fair and take into account the student voice while enabling a robust and considered approach.

6.2 As indicated in the procedure, we report to the student’s employing manager any incidences which suggest that there is any question regarding the student’s fitness to practise as a healthcare professional.

6.3 The student’s employer will be responsible for deciding whether to undertake a Fitness to Practise investigation.